

EDUCATIONAL PROVISION FOR CHILDREN WITH SPECIFIC SPEECH AND LANGUAGE DIFFICULTIES –THE INVESTIGATION OF GOOD PRACTICE.

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Purpose

The present study built on research also funded by the Foundation which comprised surveys of all LEAs and health trusts with paediatric speech and language therapy services in England and Wales; interviews with heads of special educational needs (SEN) services in 40 LEAs and with heads of speech and language therapy services in their related health trusts; and interviews with heads of language units and special schools in these 20 LEAs together with heads of 10/11 special schools for children with specific speech and language difficulties (SSLD) throughout England and Wales. We had identified worrying limitation in the provision and support for children in our first study, but also many examples of apparently good practice. The purpose of the present study, therefore, was to try to explore and analyse good practice for children with SSLD.

Research design

The research was grounded in a systemic perspective of SEN, considering not only within child factors but also the environment in which the child is developing and time, in particular the change in interaction of within child and environmental factors over time. LEAs have, to varying degrees, a systemic view of provision. This includes support to mainstream schools including that provided by speech and language therapists (SLTs), specialist provision for children with SSLD (typically called 'language units' or 'language resources') and the use of other special provision. Four major dimensions of good practice were identified from analysis of the earlier data based on collaborative practice at one or more of four levels: functional, structural, process and systems-environment (after McCartney, 1999).

The total systems of provision made for children with SSLD were therefore examined in six LEAs and their eight health trust pairs, identified from the earlier research as demonstrating good practice. Three pairs were identified: two with mainly mainstream provision, two with high levels of special provision and two with mixed provision. In each pair, one LEA was urban, one rural. We investigated the system at all levels from policy formulation to practice in the classroom. Our study took issues such as determining which children had SSLD, and what provision was most appropriate, as problems for investigation.

Research methods.

Data were collected at four levels: *Policy formulation* (interviews with senior LEA and trust officers to examine *policy formulation*; document analysis); *Practice: school level* (Questionnaires to special educational needs coordinators (SENCOs), educational psychologists (EPs), and SLTs; interviews with a sample of SENCOs/heads of mainstream schools that had children with SSLD; SENCOs/heads of schools with designated resources/units for children with SSLD; and EPs for the schools); *Practice: child-level* (Interviews with professionals working with specific

children with SSLD (teachers, SLTs and others e.g. teaching assistants) and with these children's parents.

Summary of outcomes

We have analysed some data – in particular we are not yet able to provide the total system analyses drawn from all the constituent data from the different levels. An initial overview of the strands of evidence analysed to date suggests the following conclusions.

- We have identified a number of aspects of *good* practice. What is less apparent is *effective* practice. The former largely concerns structural and process factors whereas the latter requires evidence of an impact on the child's development. We have anecdotal evidence of the latter and many of the professionals were collecting data, often quite detailed, but systems of moving from data collection to its analysis and a demonstration of effectiveness were less evident.
- Mainstream and language unit/resource provision both claim to provide appropriate support and intervention, e.g. child sensitive language, support for curriculum access. Also, units/resources varied from relatively segregated to resource base models. Evidence on curriculum differentiation and parental support of the provision made, for example, provide support for these being examples of good practice.
- There is clear evidence of successful inclusion, and that this can be promoted under both mainstream and unit/resource systems in these LEAs.
- The professionals with the least training (learning support assistants) are taking on a high proportion of the support in mainstream and a good deal in the language units/resources.
- Support from the key outside professionals is very different. Educational psychologists appear to be relatively unengaged with the children once provision is determined. Speech and language therapists are much more engaged, especially in the language units/resources where direct intervention is more common than mainstream, where the consultation model is evident.
- There was relatively little response from these LEAs and SLT services regarding good practice at KS3/4. Even in these 'good practice' LEAs/trusts the national problem we identified in our earlier study of lack of support at secondary age is evident.